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Receive	ed: 12/08/2000				Received By: ma	laigm		
Wanted	: As time perm	its			Identical to LRB:			
For: Rie	ck Skindrud ((608) 266-3520	tor: NO Drafter: malaigm Alt. Drafters:					
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Bill

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For: Rie	ck Skindrud (6	608) 266-3520			By/Representing: Aide Drafter: malaigm			
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For: Ric	k Skindrud (6	508) 266-3520			By/Representing:	Aide	
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Bill

Received: 12/08/2000

Received By: malaigm

Wanted: As time permits

Identical to LRB:

For: Rick Skindrud (608) 266-3520

By/Representing: Aide

This file may be shown to any legislator: NO

Drafter: malaigm

May Contact:

Alt. Drafters:

Subject:

Mental Health - AODA

Extra Copies:

DAK

Pre Topic:

No specific pre topic given

Topic:

Alcohol and other drug abuse treatment of minors; parental consent requirement

Instructions:

Redraft AA1 to 1999 AB 480

Drafting History:

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DRAFTER'S NOTE FROM THE LEGISLATIVE REFERENCE BUREAU

LRB-1414/1dn GMM.../.....

Representative Skindrud:

This draft, in addition to AA1 to 1999 AB 480, also includes AA1 to AA1 to AB 480 and AA2 to AB 480, all three of which were folded into ASA 1 to AB 480, which, together with AA1 to ASA 1 to AB 480, was passed by the Assembly 95 to 2 last session.

To refresh your recollection:

- 1. AA1, which was your amendment, narrowed the scope of AB 480 to treatment for alcohol or other drug abuse.
- 2. AA1 to AA1 to AB 480, which was requested by DHFS and approved by the Committee on Children and Families, permits a parent to consent to have a minor assessed for alcohol or other drug abuse.
- 3. AA2 to AB 480, which was offered by Representative Miller and approved by the Committee on Children and Families, requires an assessment for alcohol or other drug abuse to conform to the multidisciplinary screen criteria specified in s. 938.547 (4), stats.
- 4. AA1 to ASA 1 to AB 480, which was offered by Representative Grothman, clarifies that a minor under 14 years of age may receive inpatient treatment, and a minor under 12 years of age may receive outpatient treatment, without the consent of the parent only if the parent cannot be found and not if the parent refuses to consent.

If you do not want any of these amendments included in the draft, please advise and I will take them out.

Gordon M. Malaise Senior Legislative Attorney Phone: (608) 266–9738

E-mail: gordon.malaise@legis.state.wi.us

1999 - 2000 LEGISLATURE



LRBs0769/1
GMM:wlj:jf



ASSEMBLY SUBSTITUTE AMENDMENT 1,

TO 1999 ASSEMBLY BILL 480

LPS: Inserts are out of order ·

November 1, 1999 - Offered by COMMITTEE ON CHILDREN AND FAMILIES.

REGEN

alcohol or other

AN ACT to amend 51.13 (1) (a), 51.13 (1) (b), 51.13 (1) (c), 51.13 (1) (d), 51.13 (1) (e), 51.13 (2) (a), 51.13 (2) (b), 51.13 (2) (d), 51.13 (3) (b), 51.13 (3) (c), 51.13 (4)

(a) (intro.), 51.13 (4) (c), 51.13 (4) (d), 51.13 (4) (g) (intro.), 51.13 (4) (g) 1., 51.13

(6) (a), 51.13 (7) (a), 51.13 (7) (b), 51.13 (7) (c), 51.22 (2), 51.35 (3) (a), 51.35 (3)

(b), 51.35 (3) (g), 51.47 (title), 51.47 (1) and 51.61 (6); and to create 51.48 of the

statutes; relating to: treatment of minors for alcoholism or drug abuse.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

SECTION 1. 51.13 (1) (a) of the statutes is amended to read:

*51.13 (1) (a) Except as provided in s. 51.45 (2m), the application for voluntary admission of a minor who is under 14 years of age to an approved inpatient treatment facility for the primary purpose of treatment for alcoholism or drug abuse and the application for voluntary admission of a minor who is under 14 years of age to an approved inpatient treatment facility for the primary purpose of treatment for

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required by sub. (4).

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mental illness of developmental disability shall be executed by a parent who has legal custody of the minor or the minor's guardian. Any statement or conduct by a minor under the age of 14 who is the subject of an application for voluntary admission under this paragraph indicating that the minor does not agree to admission to the facility shall be noted on the face of the application and shall be noted in the petition

SECTION 2. 51.13 (1) (b) of the statutes is amended to read:

of age or ever to an approved inpatient treatment facility for the primary purpose of treatment for mental illness or developmental disability shall be executed by the minor and a parent who has legal custody of the minor or the minor's guardian, except as provided in par. (c).

SECTION 3. 51.13 (1) (c) of the statutes is amended to read:

51.13 (1) (c) If a minor 14 years of age or older wishes to be admitted to an approved inpatient treatment facility but a parent with legal custody or the guardian refuses to execute the application for admission or cannot be found, or if there is no parent with legal custody, the minor or a person acting on the minor's behalf may petition the court assigned to exercise jurisdiction under chs. 48 and 938 in the county of residence of the parent or guardian for approval of the admission. A copy of the petition and a notice of hearing shall be served upon the parent or guardian at his or her last–known address. If, after a hearing, the court determines that the parent or guardian's consent is of the parent or guardian is being unreasonably withheld er, that the parent or guardian cannot be found or that there is no parent with legal custody, and that the admission is proper under the standards prescribed in sub. (4) (d), it the court shall approve the minor's admission without the parent

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or guardian's consent of the parent or guardian. The court may, at the minor's request, temporarily approve the admission pending a hearing on the petition. If a hearing is held under this subsection, no review or hearing under sub. (4) is required

SECTION 4. 51.13 (1) (d) of the statutes is amended to read:

51.13 (1) (d) A minor against whom a petition or statement has been filed under s. 51.15, 51.20 or 51.45 (12) or (13) may be admitted under this section. The court may permit the minor to become a voluntary patient pursuant to under this section upon approval by the court of an application executed pursuant to under par. (a), (b) or (c), and the judge. The court shall then dismiss the proceedings under s. 51.15, 51.20 or 51.45 (12) or (13). If a hearing is held under this subsection, no hearing under sub. (4) is required.

SECTION 5. 51.13 (1) (e) of the statutes is amended to read:

51.13 (1) (e) A minor may be admitted immediately upon the approval of the application executed under par. (a) or (b) by the treatment director of the facility or his or her designee or, in the case of a center for the developmentally disabled, the director of the center or his or her designee, and the director of the appropriate county department under s. 51.42 or 51.437 if such the county department is to be responsible for the cost of the minor's therapy and treatment. Approval shall be based upon an informed professional opinion that the minor is in need of psychiatric services or services for developmental disability, alcoholism or drug abuse, that the treatment facility offers inpatient therapy or treatment which is appropriate for the minor's needs and that inpatient care in the facility is the least restrictive therapy or treatment consistent with the minor's needs. In the case of a minor who is being admitted for the primary purpose of treatment for alcoholism or drug abuse, if the minor agrees to participate in an alcohol or other drug abuse assessment that

approval shall also be based on the results of

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the minor's guardian.

conforms to the criteria specified in s. 938.547 (4) appreval shall also be results of the assessment.

Section 6. 51.13 (2) (a) of the statutes is amended to read:

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abuse

51.13 (2) (a) A minor may be admitted to an inpatient treatment facility without complying with the requirements of this section if the admission does not involve the department or a county department under s. 51.42 or 51.437, or a contract between a treatment facility and the department or between a treatment facility and a county department. The application for voluntary admission of a minor to an inpatient treatment facility for the primary purpose of treatment for alcoholism or ,akahaham drug abuse and the application for voluntary admission of a minor who is under 14 years of age to an inpatient treatment facility for the primary purpose of treatment for mental illness or developmental disability shall be executed by a parent who has legal custody of the minor or the min guardian. The application for voluntary admission of a minor who is 14 years of age or ever to an inpatient treatment facility for the primary purpose of treatment for mental illness or developmental disability shall be executed by the minor and a parent who has legal custody of the minor or

SECTION 7. 51.13 (2) (b) of the statutes is amended to read: stot (plain)

51.13 (2) (b) Notwithstanding par. (a), any minor who is 14 years of age or older who is admitted to an inpatient treatment facility for the primary purpose of treatment of mental illness, or developmental disability, alcoholism or drug abuse has the right to be discharged within 48 hours of after his or her request, as provided in sub. (7) (b). At the time of admission, any minor who is 14 years of age or older and who is admitted for the primary purpose of treatment for mental illness or developmental disability shall be informed of this right orally and in writing by the

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1 director of the hospital or such person's designee. This paragraph does not apply to individuals who receive services in hospital emergency rooms. $\mathbf{2}$ Section 8. 51.13 (2) (d) of the statutes is amended to read: 3 51.13 (2) (d) Writing materials for use in requesting a discharge shall be made 4 available at all times to all minors who are 14 years of age or older and who are 5 6 admitted under this subsection for the primary purpose of treatment for mental illness or developmental disability. The staff of the facility shall assist such minors 7 in preparing or submitting requests for discharge. 8 **SECTION 9.** 51.13 (3) (b) of the statutes is amended to read: 9 51.13 (3) (b) A minor 14 years of age or older who has been admitted to an 10 11 inpatient treatment facility for the primary purpose of treatment for mental illness 12 or developmental disability and his or her parent or guardian shall also be informed by the director or his or her designee, both orally and in writing, in easily 13 · understandable language, of the minor's right to request discharge and to be 14 discharged within 48 hours of the request if no petition or statement is filed for 15 emergency detention, emergency commitment, involuntary commitment or **(16**) protective placement, and the minor's right to consent to or refuse treatment as 17 provided in s. 51.61 (6). (14 years of age or such 18 **SECTION 10.** 51.13 (3)/(c) of the statutes is amended to read: 19 51.13 (3) (c) A minor who has been admitted to an inpatient facility for the 20 21 primary purpose of treatment for alcoholism or drug abuse, a minor under 14 years of age who has been admitted to an inpatient treatment facility for the primary 22

purpose of treatment for mental illness of developmental disability and his or her the parent or guardian of such a minor shall also be informed by the director or his or her designee, both orally and in writing, in easily understandable language, of the

1	minor's right to a hearing to determine continued appropriateness of the admission
2	as provided in sub. (7).
3	SECTION 11. 51.13 (4) (a) (intro.) of the statutes is amended to read:
4	51.13 (4) (a) (intro.) Within 3 days of after the admission of a minor under sub.
5	(1), or within 3 days of after application for admission of the minor, whichever occurs
6	first, the treatment director of the facility to which the minor is admitted or, in the
7	case of a center for the developmentally disabled, the director of the center, shall file
8	a verified petition for review of the admission in the court assigned to exercise
9	jurisdiction under chs. 48 and 938 in the county in which the facility is located. A
10	copy of the application for admission and of any relevant professional evaluations
11	shall be attached to the petition. The petition shall contain all of the following:
12	SECTION 12. 51.13 (4) (c) of the statutes is amended to read:
13	51.13 (4) (c) A copy of the petition shall be provided by the petitioner to the
14	minor and his or her parents or guardian within 5 days of after admission.
15	SECTION 13. 51.13 (4) (d) of the statutes is amended to read:
16	51.13 (4) (d) Within 5 days of <u>after</u> the filing of the petition, the court assigned
17	to exercise jurisdiction under chs. 48 and 938 shall determine, based on the
18	allegations of the petition and accompanying documents, whether the admission is
19	voluntary on the part of the minor if the minor is 14 years of age or older and whether
20	there is a prima facie showing that the minor is in need of psychiatric services, or
2 1	services for developmental disability, alcoholism or drug abuse, that the treatment
(2)D	facility offers inpatient therapy or treatment which is appropriate to the minor's
23 Gr 23 Gr	needs and that inpatient care in the treatment facility is the least restrictive therapy
24	or treatment consistent with the needs of the minor and, if the minor is 14 years of
25	age or older and has been admitted to the treatment facility for the primary purpose

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of treatment for mental illness or developmental disability, whether the admission is voluntary on the part of the minor. If such a showing is made, the court shall permit voluntary admission. If the court is unable to make such those determinations based on the petition and accompanying documents, it shall the court may dismiss the petition as provided in par. (h); or order additional information to be produced as it deems necessary for the court to make such review, and make such those determinations within 14 days of after admission or application for admission, whichever is sooner; or it may hold a hearing within 14 days of after admission or application for admission, whichever is sooner. If a notation of the minor's unwillingness appears on the face of the petition, or if a hearing has been requested by the minor, the minor's counsel, parent or guardian, the court shall hold a hearing to review the admission within 14 days of after admission or application for admission, whichever is sooner, and shall appoint counsel to represent the minor if the minor is unrepresented. If the court deems considers it necessary, it the court shall also appoint a guardian ad litem to represent the minor.

SECTION 14. 51.13 (4) (g) (intro.) of the statutes is amended to read:

51.13 (4) (g) (intro.) If the court finds that the minor is in need of psychiatric services or services for developmental disability, alcoholism of drug abuse in an inpatient facility, and that the inpatient facility to which the minor is admitted offers therapy or treatment that is appropriate for the minor's needs and that is the least restrictive therapy or treatment consistent with the minor's needs and, in the case of a minor aged 14 or older who is being admitted for the primary purpose of treatment for mental illness or developmental disability, the application is voluntary on the part of the minor, the court shall permit voluntary admission. If the court finds that the therapy or treatment in the inpatient facility to which the minor is admitted

is not appropriate or is not the least restrictive therapy or treatment consistent with

the minor's needs, the court may order placement in or transfer to another more appropriate or less restrictive inpatient facility, except that the court may not permit or order placement in or transfer to the northern or southern centers for the developmentally disabled of a minor unless the department gives approval for the

7 if applicable:

SECTION 15. 51.13 (4) (g) 1. of the statutes is amended to read:

51.13 (4) (g) 1. The minor if he or she is aged 14 or older <u>and is being admitted</u> for the primary purpose of treatment for mental illness or developmental disability.

placement or transfer, and if the order of the court is approved by all of the following

SECTION 16. 51.13 (6) (a) of the statutes is amended to read:

51.13 (6) (a) A minor may be admitted to an inpatient treatment facility without review of the application under sub. (4) for diagnosis and evaluation or for dental, medical or psychiatric services for a period not to exceed 12 days. The application for short-term admission of a minor shall be executed by the minor's parent or guardian, and by the minor if he or she, if the minor is 14 years of age or older and is being admitted for the primary purpose of diagnosis, evaluation or services for mental illness or developmental disability, by the minor. A minor may not be readmitted to an inpatient treatment facility for psychiatric services under this paragraph within 120 days of a previous admission under this paragraph.

SECTION 17. 51.13 (7) (a) of the statutes is amended to read:

51.13 (7) (a) If a minor is admitted to an inpatient treatment facility while under 14 years of age, and if upon reaching age 14 is in need of further inpatient care and treatment primarily for mental illness or developmental disability, the director of the facility shall request the minor and the minor's parent or guardian to execute



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an application for voluntary admission. Such an application may be executed within 30 days prior to a minor's 14th birthday. If the application is executed, a petition for review shall be filed in the manner prescribed in sub. (4), unless such a review has been held within the last 120 days. If the application is not executed by the time of the minor's 14th birthday, the minor shall be discharged unless a petition or statement is filed for emergency detention, emergency commitment, involuntary commitment or protective placement by the end of the next day in which the court transacts business.

SECTION 18. 51.13 (7) (b) of the statutes is amended to read:

51.13 (7) (b) Any minor 14 years of age or over voluntarily admitted under this section for the primary purpose of treatment for mental illness or developmental disability may request discharge in writing. Upon receipt of any form of written request for discharge, the director of the facility in which the minor is admitted shall immediately notify the minor's parent or guardian. The minor shall be discharged within 48 hours after submission of the request, exclusive of Saturdays, Sundays and legal holidays, unless a petition or statement is filed for emergency detention, emergency commitment, involuntary commitment or protective placement.

SECTION 19. 51.13 (7) (c) of the statutes is amended to read:

51.13 (7) (c) Any minor who is voluntarily admitted under this section for the primary purpose of treatment for alcoholism or drug abuse and any minor under 14 years of age who is voluntarily admitted under this section for the primary purpose of treatment for mental illness or developmental disability may submit a written request to the court for a hearing to determine the continued appropriateness of the admission. If the director or staff of the inpatient treatment facility to which a minor who is voluntarily admitted under this section for the primary purpose of treatment

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for alcoholism or drug abuse or a minor under the age of 1 (is admitted) who is

voluntarily admitted under this section for the primary purpose of treatment for 2

mental illness or developmental disability observes conduct by the minor which \Im

demonstrates an unwillingness to remain at the facility, including but not limited to 4

a written expression of opinion or unauthorized absence, the director shall file a 5

6 written request with the court to determine the continued appropriateness of the

admission. A request which is made personally by a minor under this paragraph (1)

shall be signed by the minor but need not be written or composed by him or her. A

request for a hearing under this paragraph whick is received by staff or the director

of the facility in which the child is admitted shall be filed with the court by the

director. The court shall order a hearing upon request if no hearing concerning the

minor's admission has been held within 120 days of receipt of the request. The court

shall appoint counsel and, if the court deem it necessary, a guardian ad litem to

represent the minor and if a hearing is held shall hold the hearing within 14 days

of the request, unless the parties agree to a longer period. After the hearing, the court

shall make disposition of the matter in the manner provided in sub. (4).

SECTION 20. 51.22 (2) of the statutes is amended to read:

51.22 (2) Voluntary Except as provided in s. 51.13 (2), voluntary admissions

under ss. 51.10, 51.13 and 51.45 (10) shall be through the county department under

s. 51.42 or 51.437 serving the person's county of residence, or through the

department if the person to be admitted is a nonresident of this state. Admissions

through a county department under s. 51.42 or 51.437 shall be made in accordance

with s. 51.42(3)(as) 1. or 51.437(4rm)(a). Admissions through the department shall

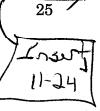
be made in accordance with sub. (3).

Section 21. 51.35 (3) (a) of the statutes is amended to read:

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51.35 (3) (a) A licensed psychologist of a juvenile correctional facility or a 1 2 secured child caring institution, as defined in s. 938.02 (15g), or a licensed physician 3 of the department of corrections, who has reason to believe that any individual confined in the facility or institution is, in his or her opinion, in need of services for 4 developmental disability, alcoholism or drug dependency or in need of psychiatric 5 6 services, and who has obtained voluntary consent to make a transfer for treatment. 7 shall make a report, in writing, to the superintendent of the facility or institution, stating the nature and basis of the belief and verifying the consent. In the case of 8 9 a minor age 14 and over who is in need of services for developmental disability or who 10 is in need of psychiatric services, the minor and the minor's parent or guardian shall consent unless the minor is admitted under s. 51.1% (1) (c); and In the case of a minor (11) 12 who is in need of services for alcoholism or drug dependency or a minor under the age of 14 who is in need of services for developmental disability or who is in need of 13 psychiatric services, only the minor's parent or guardian need consent. 14 superintendent shall inform, orally and in writing, the minor and the minor's parent 15 or guardian, that transfer is being considered and shall inform them of the basis for 16 the request and their rights as provided in s. 51.13 (3). If the department of 17 corrections, upon review/of a request for transfer, determines that transfer is 18 appropriate, that department shall immediately notify the department of health and 19 family services and, if the department of health and family services consents, the 20 department of corrections may immediately transfer the individual. The department of corrections shall file a petition under s. 51.13 (4) (a) in the court 22 23 assigned to exercise jurisdiction under chs. 48 and 938 of the county where the

SECTION 22. 51.35 (3) (b) of the statutes is amended to read:



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treatment facility is located.

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51.35 (3) (b) The court assigned to exercise jurisdiction under chs. 48 and 938 shall determine, based on the allegations of the petition and accompanying documents, whether the transfer is voluntary on the part of the minor if he or she is aged 14 or over, and whether the transfer of the minor to an inpatient facility is appropriate and consistent with the needs of the minor. In the event that and, if the minor is 14 years of age or over and is being transferred for the purpose of receiving services for developmental disability or psychiatric services, whether the transfer is voluntary on the part of the minor. If the court is unable to make such those determinations based on the petition and accompanying documents, it shall the court may order additional information to be produced as it deems necessary to make such review, and make such those determinations within 14 days of after admission, or it the court may hold a hearing within 14 days of after admission. If a notation of the minor's unwillingness appears on the face of the petition, or that if a hearing has been requested by the minor, the minor's counsel, guardian ad litem, parent or guardian, the court shall hold a hearing and appoint counsel or a guardian ad litem for the minor as provided in s. 51.13 (4) (d). At the conclusion of the hearing, the court shall approve or disapprove the request for transfer. If the minor is under the continuing jurisdiction of the court of another county, the court may order the case transferred together with all appropriate records to that court.

Section 23. 51.35 (3) (g) of the statutes is amended to read:

51.35 (3) (g) A minor 14 years of age or older who is transferred to a treatment

facility under par. (a) for the purpose of receiving services for developmental

disability or psychiatric services may request in writing a return to the juvenile

correctional facility or secured child caring institution, as defined in s. 938.02 (15g)

In the case of a minor who is transferred to a treatment facility under par. (a) for the

purpose of receiving services for alcoholism or drug dependency or a minor under 14 years of age who is transferred to a treatment facility under par. (a) for the purpose of receiving services for developmental disability or psychiatric services, the parent or guardian may make the request. Upon receipt of a request for return from a minor 14 years of age or over who is transferred to a treatment facility under par. (a) for the purpose of receiving services for developmental disability or psychiatric services, the director shall immediately notify the minor's parent or guardian. The minor shall be returned to the juvenile correctional facility or secured child caring institution within 48 hours after submission of the request unless a petition or statement is filed for emergency detention, emergency commitment, involuntary commitment or protective placement.

SECTION 24. 51.47 (title) of the statutes is amended to read:

51.47 (title) Alcohol and other drug abuse treatment for minors without parental consent.

SECTION 25. 51.47 (1) of the statutes is amended to read:

51.47 (1) Except as provided in subs. (2) and (3), any physician or health care facility licensed, approved or certified by the state for the provision of health services may render preventive, diagnostic, assessment, evaluation or treatment services for the abuse of alcohol or other drugs to a minor 12 years of age or over without obtaining the consent of or notifying the minor's parent or guardian. Unless consent of the minor's parent or guardian is required under sub. (2), the physician or health care facility shall obtain the minor's consent prior to billing a 3rd party for services under this section. If the panor does not consent, the minor shall be solely responsible for paying for the services, which the department shall bill to the minor under s. 46.03 (18) (b).

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SECTION 26. 51.18 of the statutes is created to read:

51.48 Alcohol or other drug abuse treatment for minors with parental consent. A parent or guardian of a minor may consent to have the minor assessed by an approved treatment facility for the minor's abuse of alcohol or other drugs. If, based on the assessment, the approved treatment facility determines that the minor is in need of treatment for the abuse of alcohol or other drugs, the approved treatment facility shall recommend a plan of treatment that is appropriate for the minor's needs and that provides for the least restrictive form of treatment consistent with the minor's needs. That treatment may consist of outpatient treatment, day treatment/ or, if the minor is admitted in accordance with s. 51.13, inpatient treatment. The

parent or guardian of the minor may consent to the treatment recommended under

this section. The consent of the minor to assessment or treatment under this section

is not required.

SECTION 27. 51.61 (6) of the statutes is amended to read:

51.61 (6) Subject to the rights of patients provided under this chapter, the department, county departments under s. 51.42 or 51.437 and any agency providing services under an agreement with the department or those county departments have the right to use customary and usual treatment techniques and procedures in a reasonable and appropriate manner in the treatment of patients who are receiving services under the mental health system, for the purpose of ameliorating the conditions for which the patients were admitted to the system. The written, informed consent of any patient shall first be obtained, unless the person has been found not competent to refuse medication and treatment under s. 51.61(1)(g) or the person is a minor who is receiving services for alcoholism or drug abuse or a minor under 14 years of age who is receiving services for mental illness of developmental

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1999 - 2000 LEGISLATURE

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TO 1999 ASSEMBLY BILL 480

November 3, 1999 - Offered by Representative GROTHMAN.

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1	At the locations mercated, amend the substitute amendment as follows:
2	1. Page 2, line 12: after "(c)" insert "1".
3	2. Page 2, line 13: delete lines 13 to 25.
4	Page 3, line 1: delete lines 1 to 3 and substitute:
5	SECTION 34. 51.13 (1) (c) of the statutes is renumbered 51.13 (1) (c) 1. and
6	amended to read:
7	51.13 (1) (c) 1. If a minor 14 years of age or older wishes to be admitted to an

51.13 (1) (c) 1. If a minor 14 years of age or older wishes to be admitted to an approved inpatient treatment facility but a parent with legal custody or the guardian refuses to execute the application for admission or cannot be found, or if there is no parent with legal custody, the minor or a person acting on the minor's behalf may petition the court assigned to exercise jurisdiction under chs. 48 and 938 in the county of residence of the parent or guardian for approval of the admission. A copy

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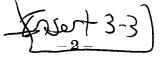
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of the petition and a notice of hearing shall be served upon the parent or guardian at his or her last-known address. If, after a hearing, the court determines that the parent or guardian's consent is of the parent or guardian is being unreasonably withheld or, that the parent or guardian cannot be found, or that there is no parent with legal custody, and that the admission is proper under the standards prescribed in sub. (4) (d), it the court shall approve the minor's admission without the parent or guardian's consent of the parent or guardian.

3. The court may, at the minor's request, temporarily approve the admission pending hearing on the petition. If a hearing is held under this subsection subd. or 2., no review or hearing under sub. (4) is required.

SECTION 33. 51.13 (1) (c) 2. of the statutes is created to read:

51.13 (1) (c) 2. If a minor under 14 years of age wishes to be admitted to an approved inpatient treatment facility but a parent with legal custody or the guardian cannot be found, or if there is no parent with legal custody, the minor or a person acting on the minor's behalf may petition the court assigned to exercise jurisdiction under chs. 48 and 938 in the county of residence of the parent or guardian for approval of the admission. A copy of the petition and a notice of hearing shall be served upon the parent or guardian at his or her last-known address. If, after a hearing, the court determines that the parent or guardian cannot be found or that there is no parent with legal custody, and that the admission is proper under the standards prescribed in sub. (4) (d), the court shall approve the minor's admission without the consent of the parent or guardian.

Page 4, line 2: after that line insert:

(end of insurt)

2001–2002 DRAFTING INSERT FROM THE LEGISLATIVE REFERENCE BUREAU

(INSERT 11-24)

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SECTION in 51.35 (3) (a) of the statutes is amended to read:

51.35 (3) (a) A licensed psychologist of a secured correctional facility or, a secured child caring institution, or a secured group home or a licensed physician of the department of corrections, who has reason to believe that any individual confined in the secured correctional facility, secured child caring institution, or secured group home is, in his or her opinion, in need of services for developmental disability, alcoholism, or drug dependency or in need of psychiatric services, and who has obtained voluntary consent to make a transfer for treatment, shall make a report, in writing, to the superintendent of the secured correctional facility, secured child caring institution, or secured group home, stating the nature and basis of the belief and verifying the consent. In the case of a minor age 14 and over who is in need of services for developmental disability or who is in need of psychiatric services, the minor and the minor's parent or guardian shall consent unless the minor is admitted under s. 51.13 (1) (c); and in 1. In the case of a minor who is in need of services for alcoholism or drug dependency or a minor under the age of 14 only the minor's parent or guardian need consent. The superintendent shall inform, orally and in writing, the minor and the minor's parent or guardian, that transfer is being considered and shall inform them of the basis for the request and their rights as provided in s. 51.13 (3). If the department of corrections, upon review of a request for transfer, determines that transfer is appropriate, that department shall immediately notify the department of health and family services and, if the department of health and family services consents, the department of corrections may immediately transfer the individual. The department of health and family

unless the Minor is admitted under 4.

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alisholism, or drug dependency or in need of psychiatric services

services shall file a petition under s. 51.13 (4) (a) in the court assigned to exercise jurisdiction under chs. 48 and 938 of the county where the treatment facility is located.

History: 1975 c. 430 ss. 18, 81; 1977 c. 26, 29, 428; 1979 c. 110 s. 60 (1); 1981 c. 74 s. 2; 1981 c. 314 s. 144; 1983 a. 27, 441, 474; 1985 a. 29, 176, 332; 1987 a. 366, 403; 1989 a. 31, 56, 107; 1991 a. 39; 1993 a. 451; 1995 a. 27 ss. 3258m, 3259m, 9126 (19); 1995 a. 77, 292; 1997 a. 35; 1999 a. 9.

(END OF INSERT)

(INSERT 13-11)

SECTION (3) (c) of the statutes is amended to read:

51.35 (3) (c) A licensed psychologist of a secured correctional facility or, a secured child caring institution, or a secured group home, or a licensed physician of the department of corrections, who has reason to believe that any individual confined in the secured correctional facility, secured child caring institution, or secured group home, in his or her opinion, is mentally ill, drug dependent, or developmentally disabled and is dangerous as described in s. 51.20 (1) (a) 2. a., b., c., or d., is mentally ill, is dangerous, and satisfies the standard under s. 51.20 (1) (a) 2. e., or is an alcoholic and is dangerous as described in s. 51.45 (13) (a) 1. and 2., shall file a written report with the superintendent of the secured correctional facility, secured child caring institution, or secured group home, stating the nature and basis of the belief. If the superintendent, upon review of the allegations in the report, determines that transfer is appropriate, he or she shall file a petition according to s. 51.20 or 51.45 in the court assigned to exercise jurisdiction under chs. 48 and 938 of the county where the secured correctional facility, secured child caring institution, or secured group home is located. The court shall hold a hearing according to procedures provided in s. 51.20 or 51.45 (13).

NOTE: NOTE: Par. (c) is repealed and recreated eff. 12-1-01 by 1999 Wis. Act 9 to read: NOTE:

SECTION 3. 51.35 (3) (c) of the statutes, as affected by 1999 Wisconsin Act 9, section 1558d, and 2001 Wisconsin Act (this act), is repealed and recreated to read:

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51.35 (3) (c) A licensed psychologist of a secured correctional facility, a secured child caring institution or a secured group home, or a licensed physician of the department of corrections, who has reason to believe that any individual confined in the secured correctional facility, secured child caring institution, or secured group home, in his or her opinion, is mentally ill, drug dependent, or developmentally disabled and is dangerous as described in s. 51.20 (1) (a) 2., or is an alcoholic and is dangerous as described in s. 51.45 (13) (a) 1. and 2., shall file a written report with the superintendent of the secured correctional facility, secured child caring institution, or secured group home, stating the nature and basis of the belief. If the superintendent, upon review of the allegations in the report, determines that transfer is appropriate, he or she shall file a petition according to s. 51.20 or 51.45 in the court assigned to exercise jurisdiction under ch. 48 of the county where the secured correctional facility, secured child caring institution, or secured group home is located. The court shall hold a hearing according to procedures provided in s. 51.20 or 51.45 (13).

History: 1975 c. 430 ss. 18, 81; 1977 c. 26, 29, 428; 1979 c. 110 s. 60 (1); 1981 c. 74 s. 2; 1981 c. 314 s. 144; 1983 a. 27, 441, 474; 1985 a. 29, 176, 332; 1987 a. 366, 403; 1989 a. 31, 56, 107; 1991 a. 39; 1993 a. 31; 1995 a. 27 ss. 3258m, 3159m, 9126 (19); 1995 a. 77, 292; 1997 a. 35; 1999 a. 9.

SECTION 51.35 (3) (g) of the statutes is amended to read:

51.35 (3) (g) A minor 14 years of age or older who is transferred to a treatment facility under par. (a) for the purpose of receiving services for developmental disability or psychiatric services may request in writing a return to the secured correctional facility, secured child caring institution, or secured group home. In the case of a minor who is transferred to a treatment facility under par. (a) for the purpose of receiving services for alcoholism or drug dependency or a minor under 14 years of age, the parent or guardian may make the request. Upon receipt of a request for return from a minor 14 years of age or every the director shall immediately notify the minor's parent or guardian. The minor shall be returned to the secured correctional facility, secured child caring institution, or secured group home within 48 hours after submission of the request unless a petition or statement is filed for

or older

who is transferred to a treatment facility under par. (a) for
the purpose of receiving services for developmental disability
alcoholism, or drug dependency prophetic

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emergency detention, emergency commitment, involuntary commitment, or protective placement.

History: 1975 c. 430 ss. 18, 81; 1977 c. 26, 29, 428; 1979 c. 110 s. 60 (1); 1981 c. 74 s. 2; 1981 c. 314 s. 144; 1983 a. 27, 441, 474; 1985 a. 29, 176, 332; 1987 a. 366, 403; 1989 a. 31, 56, 107; 1991 a. 39; 1993 a. 451; 1995 a. 27 ss. 3258m, 3259m, 9126 (19); 1995 a. 77, 292; 1997 a. 35; 1999 a. 9.

(END OF INSERT)

(INSERT 14-13)

SECTION 5. 51.48 of the statutes is amended to read:

treatment of minor without minor's consent. A minor's parent or guardian may consent to have the minor tested for the presence of alcohol or other drugs in the minor's body or to have the minor assessed by an approved treatment facility for the minor's abuse of alcohol or other drugs according to the criteria specified in s. 938.547 (4). If, based on the assessment, the approved treatment facility determines that the minor is in need of treatment for the abuse of alcohol or other drugs, the approved treatment facility shall recommend a plan of treatment that is appropriate for the minor's needs and that provides for the least restrictive form of treatment consistent with the minor's needs. That treatment may consist of outpatient treatment, day treatment, or, if the minor is admitted in accordance with s. 51.13, inpatient treatment. The parent or guardian of the minor may consent to the treatment recommended under this section. Consent of the minor is not required for testing, assessment, or treatment under this section is not required.

History 1999 a. 9

(END OF INSERT

(INSERT A)

Analysis by the Legislative Reference Bureau

Under current law, the parent or guardian of a minor may consent to have the minor tested for the presence of alcohol or other drugs in the minor's body, without

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"Section 5m. 51.13 (1) (f) of the statutes is amended to read:

51.13 (1) (f) Admission under par. (c) 1. or 2, or (d) shall also be approved by the treatment director of the facility or his or her designee, or in the case of a center for the developmentally disabled, the director of the center or his or her designee, and the director of the appropriate county department under s. 51.42 or 51.437 if the county department is to be responsible for the cost of the minor's therapy and treatment, within 14 days of the minor's admission."

6. Page 11, line 11: after "and" insert "1. or 2".

• Page 13, line 15: delete lines 15 to 25 and substitute:

SECTION 25 51.47 (1) of the statutes is amended to read:

facility licensed, approved or certified by the state for the provision of health services may render preventive, diagnostic, assessment, evaluation or treatment services for the abuse of alcohol or other drugs to a minor 12 years of age or over without obtaining the consent of or notifying the minor's parent or guardian and may render those services to a minor under 12 years of age without obtaining the consent of or notifying the minor of age without obtaining the consent of or notifying the minor's parent or guardian, but only if a parent with legal custody or guardian of the minor under 12 years of age cannot be found or there is no parent with legal custody of the minor under 12 years of age. Unless consent of the minor's parent or guardian is required under sub. (2), the physician or health care facility shall obtain the minor's consent prior to billing a 3rd party for services under this section. If the minor does not consent, the minor shall be solely responsible for paying for the services, which the department shall bill to the minor under s. 46.03 (18) (b).

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(END) (An assessment under This subsection shall conform to The criterian specified in 5. 938.547 (4). remergency detention, emergency commitment, involuntary commitment, or protective placement.

History: 1975 c. 430 ss. 18, 81; 1977 c. 26, 29, 428; 1979 c. 110 s. 60 (1); 1981 c. 74 s. 2; 1981 c. 314 s. 144; 1983 a. 27, 441, 474; 1985 a. 29, 176, 332; 1987 a. 366, 403; 1989 a. 31, 56, 107; 1991 a. 39; 1993 a. 451; 1995 a. 27 ss. 3258m, 3259m, 9126 (19); 1995 a. 77, 292; 1997 a. 35; 1999 a. 9.

(END-OF-INSERT)

(INSERT 14-13)

SECTION 5. 51.48 of the statutes is amended to read:

treatment of minor without minor's consent. A minor's parent or guardian may consent to have the minor tested for the presence of alcohol or other drugs in the minor's body or to have the minor assessed by an approved treatment facility for the minor's abuse of alcohol or other drugs according to the criteria specified in s. 938.547 (4). If, based on the assessment, the approved treatment facility determines that the minor is in need of treatment for the abuse of alcohol or other drugs, the approved treatment facility shall recommend a plan of treatment that is appropriate for the minor's needs and that provides for the least restrictive form of treatment consistent with the minor's needs. That treatment may consist of outpatient treatment, day treatment, or, if the minor is admitted in accordance with s. 51.13, inpatient treatment. The parent or guardian of the minor may consent to the treatment recommended under this section. Consent of the minor is not required for testing, assessment, or treatment under this section is not required.

History: 1999 a. 9.

(END OF INSERT)

(INSERT A)

Analysis by the Legislative Reference Bureau

Under current law, the parent or guardian of a minor may consent to have the minor tested for the presence of alcohol or other drugs in the minor's body, without

the consent of the minor. For inpatient treatment of a minor 14 years of age or over for alcohol or other drug abuse, however, the consent of the minor, as well as the consent of the minor's parent or guardian, is required. This bill eliminates the requirement that a minor 14 years of age or over consent before the minor may receive inpatient treatment for alcohol or other drug abuse. The bill also permits a parent or guardian of a minor to consent to have the minor assessed for the minor's abuse of alcohol or other drugs and to consent to a plan of treatment that is recommended based on the assessment. The consent of the minor to the assessment or the treatment is not required.

Under current law, if a minor 14 years of age or over wishes to be admitted to an inpatient facility for treatment for alcohol or other drug abuse, but the minor's parent or guardian refuses to execute the application for admission or cannot be found, the minor may petition the court assigned to exercise jurisdiction under the children's code (juvenile court) for approval of the admission. This bill permits a minor under 14 years of age to petition the juvenile court for approval of his or her admission to an inpatient facility if the minor's parent or guardian cannot be found.

Similarly, under current law, a physician or health care facility may render preventive, diagnostic, assessment, evaluation, or treatment services for the abuse of alcohol or other drugs to a minor 12 years of age or over without obtaining the consent of or notifying the minor's parent or guardian. This bill permits a physician or health care facility to render those services to a minor under 12 years of age without obtaining that consent or providing that notice if the minor's parent or guardian cannot be found.

Under current law, a minor 14 years of age or over who is voluntarily admitted to an inpatient facility for treatment for alcohol or other drug abuse may request that he or she be discharged from the facility and, subject to certain exceptions, must be discharged within 48 hours after submission of the request. This bill eliminates the requirement that a minor 14 years of age or over who has been voluntarily admitted to an inpatient facility be discharged within 48 hours after his or her request and instead requires the juvenile court to hold a hearing on such a request to determine the continued appropriateness of the admission.

For further information see the **state and local** fiscal estimate, which will be printed as an appendix to this bill.

(END OF INSERT)

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DRAFTER'S NOTE FROM THE LEGISLATIVE REFERENCE BUREAU

LRB-1414/1dn GMM:wlj:pg

January 10, 2001

Representative Skindrud:

This draft, in addition to AA1 to 1999 AB-480, also includes AA1 to AA1 to AB-480 and AA2 to AB-480, all three of which were folded into ASA 1 to AB-480, which, together with AA1 to ASA 1 to AB-480, was passed by the Assembly 95 to 2 last session.

To refresh your memory:

- 1. AA1, which was your amendment, narrowed the scope of AB-480 to treatment for alcohol or other drug abuse.
- 2. AA1 to AA1 to AB-480, which was requested by DHFS and approved by the Committee on Children and Families, permits a parent to consent to have a minor assessed for alcohol or other drug abuse.
- 3. AA2 to AB-480, which was offered by Representative Miller and approved by the Committee on Children and Families, requires an assessment for alcohol or other drug abuse to conform to the multidisciplinary screen criteria specified in s. 938.547 (4), stats
- 4. AA1 to ASA 1 to AB-480, which was offered by Representative Grothman, clarifies that a minor under 14 years of age may receive inpatient treatment, and a minor under 12 years of age may receive outpatient treatment, without the consent of the parent only if the parent cannot be found and not if the parent refuses to consent.

If you do not want any of these amendments included in the draft, please advise and I will take them out.

Gordon M. Malaise Senior Legislative Attorney Phone: (608) 266–9738

E-mail: gordon.malaise@legis.state.wi.us

STATE OF WISCONSIN – LEGISLATIVE REFERENCE BUREAU – LEGAL SECTION (608–266–3561)

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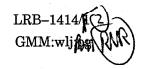
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State of Misconsin 2001 - 2002 LEGISLATURE



DNOTE



2001 BILL

REGEN

AN ACT to renumber and amend 51.13 (1) (c); to amend 51.13 (1) (a), 51.13 (1)

(b), 51.13 (1) (d), 51.13 (1) (e), 51.13 (2) (a), 51.13 (2) (b), 51.13 (2) (d), 51.13 (3)

(b), 51.13 (3) (c), 51.13 (4) (a) (intro.), 51.13 (4) (c), 51.13 (4) (d), 51.13 (4) (g)

 $(intro.),\,51.13\,(4)\,(g)\,1.,\,51.13\,(6)\,(a),\,51.13\,(7)\,(a),\,51.13\,(7)\,(b),\,51.13\,(7)\,(c),\,51.22$

(2), 51.35 (3) (a), 51.35 (3) (b), 51.35 (3) (c), 51.35 (3) (g), 51.47 (title), 51.47 (1),

51.48 and 51.61 (6); to repeal and recreate 51.35 (3) (c); and to create 51.13

(1) (c) 2. of the statutes; relating to: treatment of minors for alcohol or other

drug abuse.

Analysis by the Legislative Reference Bureau

Under current law, the parent or guardian of a minor may consent to have the minor tested for the presence of alcohol or other drugs in the minor's body, without the consent of the minor. For inpatient treatment of a minor 14 years of age or over for alcohol or other drug abuse, however, the consent of the minor, as well as the consent of the minor's parent or guardian, is required. This bill eliminates the requirement that a minor 14 years of age or over consent before the minor may receive inpatient treatment for alcohol or other drug abuse. The bill also permits a parent or guardian of a minor to consent to have the minor assessed for the minor's abuse of alcohol or other drugs and to consent to a plan of treatment that is

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recommended based on the assessment. The consent of the minor to the assessment or the treatment is not required.

Under current law, if a minor 14 years of age or over wishes to be admitted to an inpatient facility for treatment for alcohologor other drug abuse, but the minor's parent or guardian refuses to execute the application for admission or cannot be found, the minor may petition the court assigned to exercise jurisdiction under the children's code (juvenile court) for approval of the admission. This bill permits a minor under 14 years of age to petition the juvenile court for approval of his or her admission to an inpatient facility if the minor's parent or guardian cannot be found.

Similarly, under current law, a physician or health care facility may render preventive, diagnostic, assessment, evaluation, or treatment services for the abuse of alcohol or other drugs to a minor 12 years of age or over without obtaining the consent of or notifying the minor's parent or guardian. This bill permits a physician or health care facility to render those services to a minor under 12 years of age without obtaining that consent or providing that notice if the minor's parent or guardian cannot be found.

Under current law, a minor 14 years of age or over who is voluntarily admitted to an inpatient facility for treatment for alcohol or other drug abuse may request that he or she be discharged from the facility and, subject to certain exceptions, must be discharged within 48 hours after submission of the request. This bill eliminates the requirement that a minor 14 years of age or over who has been voluntarily admitted to an inpatient facility be discharged within 48 hours after his or her request and instead requires the juvenile court to hold a hearing on such a request to determine the continued appropriateness of the admission.

For further information see the **state** and **local** fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

Section 1. 51.13 (1) (a) of the statutes is amended to read:

51.13 (1) (a) Except as provided in par. (c) and s. 51.45 (2m), the application for voluntary admission of a minor who is under 14 years of age or older to an approved inpatient treatment facility for the primary purpose of treatment for alcoholism or drug abuse and the application for voluntary admission of a minor who is under 14 years of age to an approved inpatient treatment facility for the primary purpose of treatment for mental illness, developmental disability, alcoholism, or drug abuse shall be executed by a parent who has legal custody of the minor or the minor's

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guardian. Any statement or conduct by a minor under the age of 14 who is the subject of an application for voluntary admission under this paragraph indicating that the minor does not agree to admission to the facility shall be noted on the face of the application and shall be noted in the petition required by sub. (4).

SECTION 2. 51.13 (1) (b) of the statutes is amended to read:

51.13 (1) (b) The application for voluntary admission of a minor who is 14 years of age or ever older to an approved inpatient treatment facility for the primary purpose of treatment for mental illness or developmental disability shall be executed by the minor and a parent who has legal custody of the minor or the minor's guardian, except as provided in par. (c) (1).

SECTION 3. 51.13 (1) (c) of the statutes is renumbered 51.13 (1) (c) 1. and amended to read:

51.13 (1) (c) 1. If a minor 14 years of age or older wishes to be admitted to an approved inpatient treatment facility but a parent with legal custody or the guardian refuses to execute the application for admission or cannot be found, or if there is no parent with legal custody, the minor or a person acting on the minor's behalf may petition the court assigned to exercise jurisdiction under chs. 48 and 938 in the county of residence of the parent or guardian for approval of the admission. A copy of the petition and a notice of hearing shall be served upon the parent or guardian at his or her last–known address. If, after a hearing, the court determines that the parent or guardian's consent is of the parent or guardian is being unreasonably withheld ex, that the parent or guardian cannot be found, or that there is no parent with legal custody, and that the admission is proper under the standards prescribed in sub. (4) (d), it the court shall approve the minor's admission without the parent or guardian's consent of the parent or guardian.

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3. The court may, at the minor's request, temporarily approve the admission pending hearing on the petition. If a hearing is held under this subsection subd. 1. or 2., no review or hearing under sub. (4) is required.

Section 4. 51.13 (1) (c) 2. of the statutes is created to read:

51.13 (1) (c) 2. If a minor under 14 years of age wishes to be admitted to an approved inpatient treatment facility but a parent with legal custody or the guardian cannot be found, or if there is no parent with legal custody, the minor or a person acting on the minor's behalf may petition the court assigned to exercise jurisdiction under chs. 48 and 938 in the county of residence of the parent or guardian for approval of the admission. A copy of the petition and a notice of hearing shall be served upon the parent or guardian at his or her last–known address. If, after a hearing, the court determines that the parent or guardian cannot be found or that there is no parent with legal custody, and that the admission is proper under the standards prescribed in sub. (4) (d), the court shall approve the minor's admission without the consent of the parent or guardian.

Section 5. 51.13 (1) (d) of the statutes is amended to read:

51.13 (1) (d) A minor against whom a petition or statement has been filed under s. 51.15, 51.20, or 51.45 (12) or (13) may be admitted under this section. The court may permit the minor to become a voluntary patient pursuant to under this section upon approval by the court of an application executed pursuant to under par. (a), (b), or (c), and the judge. The court shall then dismiss the proceedings under s. 51.15, 51.20, or 51.45 (12) or (13). If a hearing is held under this subsection, no hearing under sub. (4) is required.

SECTION 6. 51.13 (1) (e) of the statutes is amended to read:

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51.13 (1) (e) A minor may be admitted immediately upon the approval of the application executed under par. (a) or (b) by the treatment director of the facility or his or her designee or, in the case of a center for the developmentally disabled, the director of the center or his or her designee, and the director of the appropriate county department under s. 51.42 or 51.437 if such the county department is to be responsible for the cost of the minor's therapy and treatment. Approval shall be based upon an informed professional opinion that the minor is in need of psychiatric services or services for developmental disability, alcoholism, or drug abuse, that the treatment facility offers inpatient therapy or treatment which that is appropriate for the minor's needs, and that inpatient care in the facility is the least restrictive therapy or treatment consistent with the minor's needs. In the case of a minor who is being admitted for the primary purpose of treatment for alcoholism or drug abuse, approval shall also be based on the results of an alcohol or other drug abuse assessment that conforms to the criteria specified in s. 938.547 (4).

SECTION 7. 51.13 (2) (a) of the statutes is amended to read:

51.13 (2) (a) A minor may be admitted to an inpatient treatment facility without complying with the requirements of this section if the admission does not involve the department or a county department under s. 51.42 or 51.437, or a contract between a treatment facility and the department or between a treatment facility and a county department. The application for voluntary admission of a minor who is 14 years of age or older to an inpatient treatment facility for the primary purpose of treatment for alcoholism or drug abuse and the application for voluntary admission of a minor who is under 14 years of age to an inpatient treatment facility for the primary purpose of treatment for mental illness, developmental disability, alcoholism, or drug abuse shall be executed by a parent who has legal custody of the

minor or by the minor's guardian. The application for voluntary admission of a minor 1 2 who is 14 years of age or over older to an inpatient treatment facility for the primary 3 purpose of treatment for mental illness or developmental disability shall be executed by the minor and a parent who has legal custody of the minor or the minor's guardian. 4 5 **SECTION 8.** 51.13 (2) (b) of the statutes is amended to read: 6 51.13 (2) (b) Notwithstanding par. (a), any minor who is 14 years of age or older 7 and who is admitted to an inpatient treatment facility for the primary purpose of (8)treatment of mental illness, or developmental disability, alcoholism or drug abuse

in sub. (7) (b). At the time of admission, any minor who is 14 years of age or older and who is admitted to an inpatient treatment facility for the primary purpose of

has the right to be discharged within 48 hours of after his or her request, as provided

right orally and in writing by the director of the hospital or such person's designee.

treatment for mental illness or developmental disability shall be informed of this

This paragraph does not apply to individuals who receive services in hospital

emergency rooms.

SECTION 9. 51.13 (2) (d) of the statutes is amended to read:

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parent or

51.13 (2) (d) Writing materials for use in requesting a discharge shall be made available at all times to all minors who are 14 years of age or older and who are admitted under this subsection for the primary purpose of treatment for mental illness of developmental disability. The staff of the facility shall assist such minors in preparing or submitting requests for discharge.

SECTION 10. 51.13 (3) (b) of the statutes is amended to read:

51.13 (3) (b) A minor 14 years of age or older who has been admitted to an inpatient treatment facility for the primary purpose of treatment for mental illness or developmental disability and his or her parent or guardian shall also be informed

of a mmor who is voluntarily admitted under sub. (1) (c) 1. or 2 1/3

STET 14 No change

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understandable language, of the minor's right to request discharge and to be discharged within 48 hours of the request if no petition or statement is filed for emergency detention, emergency commitment, involuntary commitment, or protective placement, and the minor's right to consent to or refuse treatment as provided in s. 51.61 (6).

| OF the right & the parent or quarties to provide the minor's discharge as provided to the minor's discharge as prov

SECTION 11. 51.13 (3) (c) of the statutes is amended to read:

51.13 (3) (c) A minor 14 years of age or older who has been admitted to an inpatient facility for the primary purpose of treatment for alcoholism or drug abuse, a minor under 14 years of age who has been admitted to an inpatient treatment facility for the primary purpose of treatment for mental illness, developmental disability, alcoholism, or drug abuse, and his or her the minor's parent or guardian shall also be informed by the director or his or her designee, both orally and in writing, in easily understandable language, of the minor's right to a hearing to determine continued appropriateness of the admission as provided in sub. (7).

Section 12. 51.13 (4) (a) (intro.) of the statutes is amended to read:

51.13 (4) (a) (intro.) Within 3 days of <u>after</u> the admission of a minor under sub. (1), or within 3 days of <u>after</u> application for admission of the minor, whichever occurs first, the treatment director of the facility to which the minor is admitted or, in the case of a center for the developmentally disabled, the director of the center, shall file a verified petition for review of the admission in the court assigned to exercise jurisdiction under chs. 48 and 938 in the county in which the facility is located. A copy of the application for admission and of any relevant professional evaluations shall be attached to the petition. The petition shall contain all of the following:

Section 13. 51.13 (4) (c) of the statutes is amended to read:

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51.13 (4) (c) A copy of the petition shall be provided by the petitioner to the minor and his or her parents or guardian within 5 days of after admission.

SECTION 14. 51.13 (4) (d) of the statutes is amended to read:

51.13 (4) (d) Within 5 days of after the filing of the petition, the court assigned to exercise jurisdiction under chs. 48 and 938 shall determine, based on the allegations of the petition and accompanying documents, whether the admission is voluntary on the part of the minor if the minor is 14 years of age or older and whether there is a prima facie showing that the minor is in need of psychiatric services, or services for developmental disability, alcoholism, or drug abuse, that the treatment facility offers inpatient therapy or treatment which that is appropriate to the minor's needs, and that inpatient care in the treatment facility is the least restrictive therapy or treatment consistent with the needs of the minor, and, if the minor is 14 years of age or older and has been admitted to the treatment facility for the primary purpose of treatment for mental illness or developmental disability, whether the admission is voluntary on the part of the minor. If such a showing is made, the court shall If the court is unable to make such those permit voluntary admission. determinations based on the petition and accompanying documents, it shall the court may dismiss the petition as provided in par. (h); or order additional information to be produced as it deems necessary for the court to make such review, and make such those determinations within 14 days of after admission or application for admission, whichever is sooner; or it may hold a hearing within 14 days of after admission or application for admission, whichever is sooner. If a notation of the minor's unwillingness appears on the face of the petition, or if a hearing has been requested by the minor, or by the minor's counsel, parent, or guardian, the court shall hold a hearing to review the admission within 14 days of after admission or

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application for admission, whichever is sooner, and shall appoint counsel to represent the minor if the minor is unrepresented. If the court deems considers it necessary, it the court shall also appoint a guardian ad litem to represent the minor.

SECTION 15. 51.13 (4) (g) (intro.) of the statutes is amended to read:

51.13 (4) (g) (intro.) If the court finds that the minor is in need of psychiatric services or services for developmental disability, alcoholism, or drug abuse in an inpatient facility, and that the inpatient facility to which the minor is admitted offers therapy or treatment that is appropriate for the minor's needs and that is the least restrictive therapy or treatment consistent with the minor's needs, and, in the case of a minor aged 14 or older who is being admitted for the primary purpose of treatment for mental illness or developmental disability, that the application is voluntary on the part of the minor, the court shall permit voluntary admission. If the court finds that the therapy or treatment in the inpatient facility to which the minor is admitted is not appropriate or is not the least restrictive therapy or treatment consistent with the minor's needs, the court may order placement in or transfer to another more appropriate or less restrictive inpatient facility, except that the court may not permit or order placement in or transfer to the northern or southern centers for the developmentally disabled of a minor unless the department gives approval for the placement or transfer, and if the order of the court is approved by all of the following if applicable:

SECTION 16. 51.13 (4) (g) 1. of the statutes is amended to read:

51.13 (4) (g) 1. The minor if he or she is aged 14 or older and is being admitted for the primary purpose of treatment for mental illness or developmental disability.

SECTION 17. 51.13 (6) (a) of the statutes is amended to read:

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GMM:wlj:pg Section 17

51.13 (6) (a) A minor may be admitted to an inpatient treatment facility without review of the application under sub. (4) for diagnosis and evaluation or for dental, medical, or psychiatric services for a period not to exceed 12 days. The application for short-term admission of a minor shall be executed by the minor's parent or guardian, and by the minor if he or she, if the minor is 14 years of age or older and is being admitted for the primary purpose of diagnosis, evaluation, or services for mental illness or developmental disability, by the minor. A minor may not be readmitted to an inpatient treatment facility for psychiatric services under this paragraph within 120 days of a previous admission under this paragraph.

Section 18. 51.13 (7) (a) of the statutes is amended to read:

51.13 (7) (a) If a minor is admitted to an inpatient treatment facility while under 14 years of age, and if upon reaching age 14 is in need of further inpatient care and treatment primarily for mental illness or developmental disability, the director of the facility shall request the minor and the minor's parent or guardian to execute an application for voluntary admission. Such an application may be executed within 30 days prior to a minor's 14th birthday. If the application is executed, a petition for review shall be filed in the manner prescribed in sub. (4), unless such a review has been held within the last 120 days. If the application is not executed by the time of the minor's 14th birthday, the minor shall be discharged unless a petition or statement is filed for emergency detention, emergency commitment, involuntary commitment, or protective placement by the end of the next day in which the court transacts business. i, and

SECTION 19. 51.13 (7) (b) of the statutes is amended to read:

51.13 (7) (b) Any minor 14 years of age or over older voluntarily admitted under this section for the primary purpose of treatment for mental illness or developmental minor

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Insert 17-1

disability may request discharge in writing. Upon receipt of any form of written request for discharge, the director of the facility in which the minor is admitted shall immediately notify the minor's parent or guardian. The minor shall be discharged within 48 hours after submission of the request, exclusive of Saturdays, Sundays, and legal holidays, unless a petition or statement is filed for emergency detention. emergency commitment, involuntary commitment, or protective placement.

SECTION 20. 51.13 (7) (c) of the statutes is amended to read: Fand who is not

51.13 (7) (c) Any minor 14 years of age or older who is voluntarily admitted under this section for the primary purpose of treatment for alcoholism or drug abuse and any minor under 14 years of age who is voluntarily admitted under this section for the primary purpose of freatment for mental illness, developmental disability, alcoholism, or drug abuse may submit a written request to the court for a hearing to determine the continued appropriateness of the admission. If the director or staff of the inpatient treatment facility to which a minor under the age of 14 described in this paragraph is admitted observes conduct by the minor which that demonstrates an unwillingness to remain at the facility, including but not limited to a written expression of opinion or unauthorized absence, the director shall file a written request with the court to determine the continued appropriateness of the admission. A request which that is made personally by a minor under this paragraph shall be signed by the minor but need not be written or composed by him or her the minor. A request for a hearing under this paragraph which that is received by staff or the director of the facility in which the child is admitted shall be filed with the court by the director. The court shall order a hearing upon request if no hearing concerning the minor's admission has been held within 120 days of after receipt of the request. The court shall appoint counsel and, if the court deems considers it necessary, a

guardian ad litem to represent the minor and if a hearing is held shall hold the hearing within 14 days of <u>after</u> the request, unless the parties agree to a longer period. After the hearing, the court shall make disposition of the matter in the manner provided in sub. (4).

Section 21. 51.22 (2) of the statutes is amended to read:

51.22 (2) Voluntary Except as provided in s. 51.13 (2), voluntary admissions under ss. 51.10, 51.13, and 51.45 (10) shall be through the county department under s. 51.42 or 51.437 serving the person's county of residence, or through the department if the person to be admitted is a nonresident of this state. Admissions through a county department under s. 51.42 or 51.437 shall be made in accordance with s. 51.42 (3) (as) 1. or 51.437 (4rm) (a). Admissions through the department shall be made in accordance with sub. (3).

Section 22. 51.35 (3) (a) of the statutes is amended to read:

51.35 (3) (a) A licensed psychologist of a secured correctional facility er, a secured child caring institution, or a secured group home, or a licensed physician of the department of corrections, who has reason to believe that any individual confined in the secured correctional facility, secured child caring institution, or secured group home is, in his or her opinion, in need of services for developmental disability, alcoholism, or drug dependency or in need of psychiatric services, and who has obtained voluntary consent to make a transfer for treatment, shall make a report, in writing, to the superintendent of the secured correctional facility, secured child caring institution, or secured group home, stating the nature and basis of the belief and verifying the consent. In the case of a minor age 14 and over age 14 or older who is in need of services for developmental disability or who is in need of psychiatric services, the minor and the minor's parent or guardian shall consent unless the

minor is admitted under s. 51.13 (1) (c); and in 1. In the case of a minor age 14 or older who is in need of services for alcoholism or drug dependency or a minor under the age of 14 who is in need of services for developmental disability, alcoholism, or drug dependency or in need of psychiatric services, only the minor's parent or guardian need consent unless the minor is admitted under s. 51.13 (1) (c). The superintendent shall inform, or ally and in writing, the minor and the minor's parent or guardian, that transfer is being considered and shall inform them of the basis for the request and their rights as provided in s. 51.13 (3). If the department of corrections, upon review of a request for transfer, determines that transfer is appropriate, that department shall immediately notify the department of health and family services and, if the department of health and family services consents, the department of corrections may immediately transfer the individual. The department of health and family services shall file a petition under s. 51.13 (4) (a) in the court assigned to exercise jurisdiction under chs. 48 and 938 of the county where the treatment facility is located.

Section 23. 51.35 (3) (b) of the statutes is amended to read:

51.35 (3) (b) The court assigned to exercise jurisdiction under chs. 48 and 938 shall determine, based on the allegations of the petition and accompanying documents, whether the transfer is voluntary on the part of the minor if he or she is aged 14 or over, and whether the transfer of the minor to an inpatient facility is appropriate and consistent with the needs of the minor. In the event that and, if the minor is 14 years of age or older and is being transferred for the purpose of receiving services for developmental disability or psychiatric services, whether the transfer is voluntary on the part of the minor. If the court is unable to make such those determinations based on the petition and accompanying documents, it shall the

court may order additional information to be produced as it deems necessary to make such review, and make such those determinations within 14 days of after admission, or it the court may hold a hearing within 14 days of after admission. If a notation of the minor's unwillingness appears on the face of the petition, or that if a hearing has been requested by the minor, or by the minor's counsel, guardian ad litem, parent, or guardian, the court shall hold a hearing and appoint counsel or a guardian ad litem for the minor as provided in s. 51.13 (4) (d). At the conclusion of the hearing, the court shall approve or disapprove the request for transfer. If the minor is under the continuing jurisdiction of the court of another county, the court may order the case transferred together with all appropriate records to that court.

Section 24. 51.35 (3) (c) of the statutes is amended to read:

51.35 (3) (c) A licensed psychologist of a secured correctional facility ex, a secured child caring institution, or a secured group home, or a licensed physician of the department of corrections, who has reason to believe that any individual confined in the secured correctional facility, secured child caring institution, or secured group home, in his or her opinion, is mentally ill, drug dependent, or developmentally disabled and is dangerous as described in s. 51.20 (1) (a) 2. a., b., c., or d., is mentally ill, is dangerous, and satisfies the standard under s. 51.20 (1) (a) 2. e., or is an alcoholic and is dangerous as described in s. 51.45 (13) (a) 1. and 2., shall file a written report with the superintendent of the secured correctional facility, secured child caring institution, or secured group home, stating the nature and basis of the belief. If the superintendent, upon review of the allegations in the report, determines that transfer is appropriate, he or she shall file a petition according to s. 51.20 or 51.45 in the court assigned to exercise jurisdiction under chs. 48 and 938 of the county where the secured correctional facility, secured child caring institution, or secured

group home is located. The court shall hold/a hearing according to procedures provided in s. 51.20 or 51.45 (13).

SECTION 25. 51.35 (3) (c) of the statutes, as affected by 1999 Wisconsin Act 9, section 1558d, and 2001 Wisconsin Act (this act), is repealed and recreated to read:

51.35 (3) (c) A licensed psychologist of a secured correctional facility, a secured child caring institution, or a secured group home, or a licensed physician of the department of corrections, who has reason to believe that any individual confined in the secured correctional facility, secured child caring institution, or secured group home, in his or her opinion, is mentally ill, drug dependent, or developmentally disabled and is dangerous as described in s. 51.20 (1) (a) 2., or is an alcoholic and is dangerous as described in s. 51.45 (13) (a) 1. and 2., shall file a written report with the superintendent of the secured correctional facility, secured child caring institution, or secured group home, stating the nature and basis of the belief. If the superintendent, upon review of the allegations in the report, determines that transfer is appropriate, he or she shall file a petition according to s. 51.20 or 51.45 in the court assigned to exercise jurisdiction under ch. 48 of the county where the secured correctional facility, secured child caring institution, or secured group home is located. The court shall hold a hearing according to procedures provided in s. 51.20 or 51.45 (13).

Section 26. 51.35 (3) (g) of the statutes is amended to read:

51.35 (3) (g) A minor 14 years of age or older who is transferred to a treatment facility under par. (a) for the purpose of receiving services for developmental disability or psychiatric services may request in writing a return to the secured correctional facility, secured child caring institution, or secured group home. In the

case of a minor 14 years of age or older who is transferred to a treatment facility under par. (a) for the purpose of receiving services for alcoholism or drug dependency or a minor under 14 years of age, who is transferred to a treatment facility under par. (a) for the purpose of receiving services for developmental disability, alcoholism, or drug dependency, or psychiatric services, the parent or guardian may make the request. Upon receipt of a request for return from a minor 14 years of age or ever older, the director shall immediately notify the minor's parent or guardian. The minor shall be returned to the secured correctional facility, secured child caring institution, or secured group home within 48 hours after submission of the request unless a petition or statement is filed for emergency detention, emergency commitment, involuntary commitment, or protective placement.

SECTION 27. 51.47 (title) of the statutes is amended to read:

51.47 (title) Alcohol and other drug abuse treatment for minors without parental consent.

Section 28. 51.47 (1) of the statutes is amended to read:

51.47 (1) Except as provided in subs. (2) and (3), any physician or health care facility licensed, approved, or certified by the state for the provision of health services may render preventive, diagnostic, assessment, evaluation, or treatment services for the abuse of alcohol or other drugs to a minor 12 years of age or over without obtaining the consent of or notifying the minor's parent or guardian and may render those services to a minor under 12 years of age without obtaining the consent of or notifying the minor's parent or guardian, but only if a parent with legal custody or guardian of the minor under 12 years of age cannot be found or there is no parent with legal custody of the minor under 12 years of age. An assessment under this subsection shall conform to the criteria specified in s. 938.547 (4). Unless consent of

the minor's parent or guardian is required under sub. (2), the physician or health care facility shall obtain the minor's consent prior to billing a 3rd party for services under this section. If the minor does not consent, the minor shall be solely responsible for paying for the services, which the department shall bill to the minor under s. 46.03 (18) (b).

SECTION 29. 51.48 of the statutes is amended to read:

treatment of minor without minor's consent. A minor's parent or guardian may consent to have the minor tested for the presence of alcohol or other drugs in the minor's body or to have the minor assessed by an approved treatment facility for the minor's abuse of alcohol or other drugs according to the criteria specified in s. 938.547 (4). If, based on the assessment, the approved treatment facility determines that the minor is in need of treatment for the abuse of alcohol or other drugs, the approved treatment facility shall recommend a plan of treatment that is appropriate for the minor's needs and that provides for the least restrictive form of treatment consistent with the minor's needs. That treatment may consist of outpatient treatment, day treatment, or, if the minor is admitted in accordance with s. 51.13, inpatient treatment. The parent or guardian of the minor may consent to the treatment recommended under this section. Consent of the minor is not required for testing, assessment, or treatment under this section is not required.

SECTION 30. 51.61 (6) of the statutes is amended to read:

51.61 (6) Subject to the rights of patients provided under this chapter, the department, county departments under s. 51.42 or 51.437, and any agency providing services under an agreement with the department or those county departments have the right to use customary and usual treatment techniques and procedures in a

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reasonable and appropriate manner in the treatment of patients who are receiving services under the mental health system, for the purpose of ameliorating the conditions for which the patients were admitted to the system. The written. informed consent of any patient shall first be obtained, unless the person has been found not competent to refuse medication and treatment under s. 51.61 (1) (g) or the person is a minor 14 years or older who is receiving services for alcoholism or drug abuse or a minor under 14 years of age who is receiving services for mental illness. developmental disability, alcoholism, or drug abuse. In the case of a minor, the written, informed consent of the parent or guardian is required. Except, except as provided under an order issued under s. 51.13(1)(c) or 51.14(3)(h) or (4)(g), if. If the minor is 14 years of age or older and is receiving services for mental illness or developmental disability, the written, informed consent of the minor and the minor's parent or guardian is required. A refusal of either a minor 14 years of age or older or the minor's parent or guardian to provide written, informed consent for admission to an approved inpatient treatment facility is reviewable under s. 51.13(1)(c) 1, and a refusal of either a minor 14 years of age or older or the minor's parent or guardian to provide written, informed consent for outpatient mental health treatment is reviewable under s. 51.14.

SECTION 31. Initial applicability.

(1) This act first applies to individuals who are receiving treatment for alcohol or other drug abuse in an approved inpatient treatment facility, or who are receiving outpatient treatment for alcohol or other drug abuse, on the effective date of this subsection regardless of whether admission to the inpatient facility or outpatient program occurred or was sought prior to the effective date of this subsection.

1	SECTION 32. Effective dates. This act takes effect on the day after publication,
2	except as follows:
3	(1) The repeal and recreation of section 51.35 (3) (c) of the statutes takes effect
4	on December 1, 2001, or on the day after publication, whichever is later.
5	(END)

2001–2002 DRAFTING INSERT FROM THE LEGISLATIVE REFERENCE BUREAU

(INSERT 11-1)

In the case of a minor 14 years of age or older who is voluntarily admitted under this section for the primary purpose of treatment for alcoholism or drug abuse or a minor under 14 years of age who is voluntarily admitted under this section for the primary purpose of treatment for mental illness, developmental disability, alcoholism, or drug abuse, the parent or guardian of the minor may make the request.

(END OF INSERT)

(INSERT A-1)

(no paragraph) The bill also requires a minor who obtains admission to an inpatient facility by petitioning the juvenile court to approve the admission to be discharged within 48 hours after submitting a request for discharge.

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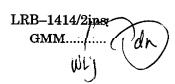
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requires the minor to be discharged within 48 hours after the request of the minor's parent or guardian. The bill also permits a minor who is not discharged either on the request of the minor or the request of the minor's parent or guardian to submit a request to the juvenile court to hold a hearing to determine the continued appropriateness of the minor's admission.

(END OF INSERT)

DRAFTER'S NOTE FROM THE LEGISLATIVE REFERENCE BUREAU



Representative Skindrud:

As I began to draft your instruction to require a minor to be discharged within 48 hours after the minor's request, I realized that such a requirement will not work when the parent checks the minor in against the minor's wishes because the requirement would create a vicious circle in which the parent checks the minor, the minor checks himself of herself out, the parent checks the minor back in, and so on. Accordingly, this draft requires the minor to be discharged on the request of the minor's parent, unless it was the minor who checked himself in In either event, it is the parent or minor, and not the court, who is making the decision.

This draft does not include your instruction to include a requirement that the advantages, disadvantages, and alternatives to a particular course of treatment be explained before a person may give informed consent to that treatment because that requirement is already covered in s. HFS. 94.03, Wis. Adm. Code, which requires a patient to be provided with specific, complete, and accurate information concerning the treatment proposed for the patient, including all of the following information:

- 1. The benefits of the proposed treatment.
- 2. The way the treatment is to be administered.
- 3. The side effects or risks of side effects of the treatment.
- 4. Alternative treatment modes.
- 5. The time period for which the consent is effective, which may be for no longer than 15 months.
- 6. The right to withdraw the informed consent at any time.

If you have any questions concerning this draft, please do not hesitate to contact me at the phone number or e-mail address listed below.

> Gordon M. Malaise 🥬 🔻 Senior Legislative Attorney

Phone: (608) 266–9738

E-mail: gordon.malaise@legis.state.wi.us

DRAFTER'S NOTE FROM THE LEGISLATIVE REFERENCE BUREAU

LRB-1414/2dn GMM:wlj:cmh

January 28, 2001

Representative Skindrud:

As I began to draft your instruction to require a minor to be discharged within 48 hours after the minor's request, I realized that such a requirement will not work when the parent checks in the minor against the minor's wishes because the requirement would create a vicious circle in which the parent checks in the minor, the minor checks out himself or herself, the parent checks back in the minor, and so on. Accordingly, this draft requires the minor to be discharged on the request of the minor's parent, unless it was the minor who checked in himself or herself. In either event, it is the parent or minor, and not the court, who is making the decision.

This draft does not include your instruction to include a requirement that the advantages, disadvantages, and alternatives to a particular course of treatment be explained before a person may give informed consent to that treatment because that requirement is already covered in s. HFS. 94.03, Wis. Adm. Code, which requires a patient to be provided with specific, complete, and accurate information concerning the treatment proposed for the patient, including all of the following information:

- 1. The benefits of the proposed treatment.
- 2. The way the treatment is to be administered.
- 3. The side effects or risks of side effects of the treatment.
- 4. Alternative treatment modes.
- 5. The time period for which the consent is effective, which may be for no longer than 15 months.
- 6. The right to withdraw the informed consent at any time.

If you have any questions concerning this draft, please do not hesitate to contact me at the phone number or e-mail address listed below.

Gordon M. Malaise Senior Legislative Attorney

Phone: (608) 266-9738

E-mail: gordon.malaise@legis.state.wi.us

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STEPHEN R. MILLER

State of Misconsin

LEGISLATIVE REFERENCE BUREAU

100 NORTH HAMILTON STREET 5TH FLOOR MADISON, WI 53701-2037

LEGAL SECTION:

(608) 266-3561 (608) 264-6948

January 28, 2001

MEMORANDUM

To:

Representative Skindrud

From:

Gordon M. Malaise, Senior Legislative Attorney

Re:

LRB-1414 Alcohol and other drug abuse treatment of minors; parental consent

requirement

The attached draft was prepared at your request. Please review it carefully to ensure that it is accurate and satisfies your intent. If it does and you would like it jacketed for introduction, please indicate below for which house you would like the draft jacketed and return this memorandum to our office. If you have any questions about jacketing, please call our program assistants at 266-3561. Please allow one day for jacketing.

JACKET FOR ASSEMBLY ____ JACKET FOR SENATE

If you have any questions concerning the attached draft, or would like to have it redrafted, please contact me at (608) 266-9738 or at the address indicated at the top of this memorandum.

If the last paragraph of the analysis states that a fiscal estimate will be prepared, the LRB will request that it be prepared after the draft is introduced. You may obtain a fiscal estimate on the attached draft before it is introduced by calling our program assistants at 266-3561. Please note that if you have previously requested that a fiscal estimate be prepared on an earlier version of this draft, you will need to call our program assistants in order to obtain a fiscal estimate on this version before it is introduced.

Please call our program assistants at 266-3561 if you have any questions regarding this memorandum.